



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appl. No. : 09/760,341 Conformation No. 2235  
Applicant : Robert M. Gruber  
Filed : February 17, 2000  
TC/A.U. : 3629  
Examiner : Richard Woo  
  
Docket No. : 82552  
Customer No. : 24129

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

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AMENDMENT

Sir:

In response to the Office action of June 16, 2004, please amend the above-identified application as follows:

Amendments to the claims begin on page 3 of this paper.

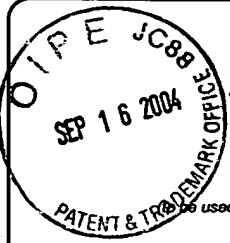
Remarks/Arguments begin on page 14 of this paper.

Please type a plus sign (+) inside this box +

PTO/SB/21 (08-003)  
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 <p style="text-align: center; font-weight: bold; font-size: 1.2em;">TRANSMITTAL FORM</p> <p style="font-size: 0.8em;">(to be used for all correspondence after initial filing)</p>	Application Number	09/760,341	
	Filing Date	02/17/2000	
	First Named Inventor	GRUBER, Robert Michael	
	Art Unit	3629	
	Examiner Name	WOO, Richard	
Total Number of Pages in This Submission	24	Attorney Docket Number	82552

**ENCLOSURES (check all that apply)**

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> Fee Transmittal Form<br><input type="checkbox"/> Fee Attached<br><input checked="" type="checkbox"/> Amendment / Reply<br><input type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits / declaration(s)<br><input type="checkbox"/> Extension of Time Request<br><input type="checkbox"/> Express Abandonment Request<br><input type="checkbox"/> Information Disclosure Statement<br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><input type="checkbox"/> Response to Missing Parts / Incomplete Application<br><input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s)<br><input type="checkbox"/> Licensing - related Papers<br><input type="checkbox"/> Petition<br><input type="checkbox"/> Petition to Convert to a Provisional Application<br><input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address<br><input type="checkbox"/> Terminal Disclaimer<br><input type="checkbox"/> Request for Refund<br><input type="checkbox"/> CD, Number of CD(s) _____ | <input type="checkbox"/> After Allowance Communication to Group<br><input type="checkbox"/> Appeal Communication to Board of Appeals and Interference's<br><input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)<br><input type="checkbox"/> Proprietary Information<br><input type="checkbox"/> Status Letter<br><input type="checkbox"/> Other Enclosure(s) (Please identify below) |
|--|--|--|

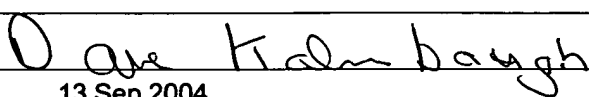
Remarks

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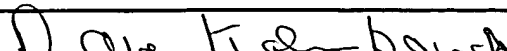
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**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm or Individual Name	David S. Kalmbaugh	29,234	
Signature			
Date	13 Sep 2004		

**CERTIFICATE OF TRANSMISSION/MAILING**

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Services with sufficient postage as first class mail in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Typed or Printed Name	David S. Kalmbaugh		
Signature		Date	13 Sep 2004

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